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|---|------------------------------|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> |                              | Docket Number (Optional)<br>32406-198948 |
| In re Application of Sarkis TOKATLIAN                       |                              |  |
| Application Number 10/715,115                               |                              | Filed November 18, 2003                  |
| For SUB AQUA BREATHING SYSTEM                               |                              |  |
| Group Art Unit<br>3743                                      | Examiner<br>Not Yet Assigned |  |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

|  |                  |
|--|------------------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ <u>115.00</u> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$ _____         |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ _____         |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$ _____         |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>65.00</u> . |                  |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.  |                  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                  |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.   |                  |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0261</u> .            |                  |

I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_ .

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

5/6/04

Date



Signature

Robert Kinberg, Reg. No. 26,924

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.



SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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